N.B. Alcoholism & Drug
Dependency Comm.

YOUTH ADDICTION SERVICES

Alcoholism & Drug Dependency Commission
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Adolescent Treatment Services

Following a review and analysis of current Adolescent Treatment Services (Appendix A) the Alcoholism and Drug Dependency Commission believes that it must ensure a safety net in the area of youth addiction. In October of 1989, the Commission proposed that four youth counsellors be recruited. It was further proposed that services be adjusted on the basis of the experience and information gathered in the first year of the proposal. It was stated that day programs be started on a pilot basis.

Statistics, reports and other findings collected from October 1/90 to January 30/91 by the Commission's youth workers reveal that the Commission has provided assessment, treatment and referral services to 230 young people under 19 years of age. The Commission realizes the need for in-patient services and will address this need in the proposed recommendations to follow. Consequently, the Commission believes that expanded and coordinated youth addiction services are needed for out-patient services and day care programs.

The Commission believes that youth addiction is a multi-dimensional problem which requires multi-dimensional approaches. In order to achieve that goal, it is suggested that a full cooperation with other governmental and community groups is required to promote community involvement in the problem of youth addiction. (Appendix B will provide a list of community services aimed at youth.)

The review mentioned above demonstrates the need for a variety of treatment options and the need to look at alternatives. Thus, the Commission makes the following recommendations for this fiscal year, on a pilot basis:

RECOMMENDATIONS

a. Treatment Services (Detoxification): Statistics indicate that approximately 7% of adolescents require detoxification services. The Commission believes that this number does not warrant the need for a specialized treatment facility.

   THEREFORE, the Commission recommends that youth in need of detoxification services be accommodated at all seven (7) existing centres in the Province.

b. Outpatient Counselling: As the community's awareness of the existence of services is growing, the demand for outpatient counselling is increasing. The Commission believes that outpatient counselling to youth in their community, with as much family involvement as possible is the most effective way to help most youth.

THEREFORE, the Commission recommends that the existing four (4) youth counsellors be retained as full time counsellors of the Alcoholism and Drug Dependency Commission. During this fiscal year four (4) additional counsellors would be identified from existing resources.

c. Day Care Program: There is a strong evidence that a day care type of program will meet the needs of some youth (as noted by other provinces, which have experimented successfully with this approach).

THEREFORE, the Commission recommends that an intensive day care program be offered in the Edmundston region (as a pilot project). This will continue as a pilot project for one year and will be evaluated on an on-going basis. Residential supervised services can be made available at the Edmundston Treatment centre.

d. Rehabilitation Services: An estimated 12% of youth seeking help or being referred for an addiction may require rehabilitation services. This is consistent with the trend in other provinces throughout Canada.

THEREFORE, the Commission recommends that the Ridgewood Rehabilitation Centre in Saint John offers a 28 day rehabilitation program (as a pilot project). This pilot project will continue for one year and will be evaluated on an on-going basis.

The Commission will continue to work towards a comprehensive youth addiction program that will provide for services accessible in their community, therefore promoting the involvement of significant others, which is a necessity to effective recovery.

The Commission, through further consultations, and in cooperation with other departments and community resources will continue the promotion of primary, secondary and tertiary prevention.

Adolescents cannot be treated in isolation. They should be treated in the context of their own community. Every effort must be made to educate family members and involve them and significant others in the treatment process. Family education and support services are presently provided by out-patient counsellors and community workers around the Province.

Lastly, The Commission will continue to enhance the in-patient and out-patient services in the Province. Requests for in-patient treatment referrals out of the province will continue to be assessed on an individual basis and approved when appropriate. The overall objective for the Commission is to ensure that youngsters receive the best quality of care possible to help them realize a full and lasting recovery.

Appendix A

Review of Adolescent Treatment Services

CONFIDENTIAL

REVIEW OF CURRENT NEW BRUNSWICK ADOLESCENT TREATMENT SERVICES

Presented to
Hon. J.R. Frenette
Minister of Health and Community Services

Febuary 18, 1991

Adolescent Treatment Services

Overview

The overall goal of a needs assessment is to identify and document the demand upon which a program is to be based. By thoroughly analyzing the needs of adolescents, one can determine how to effectively reach and treat potential clients.

Since the implementation of the adolescent treatment services, about four months ago, the four youth counsellors have been gathering and documenting the nature and extent of the drug and/or alcohol problem amongst teenagers. One must clearly understand, however, the limitations relative to that particular exercise. The information available is for a limited period of time and with a limited number of contacts within the community.

Between the first of October 1990 and January 30th 1991, the four ADDC youth counsellors have serviced 132 teenagers. However, as of January 30th, they were servicing 83 active cases, with the remainder having been either referred to other resources in the community, having received services for a short period, stopped showing up for services, or did not need further treatment after an assessment was done. Of the total 132 cases, 10 were referred to treatment centres and 7 in rehabilitation centres within this province. One was sent out of Canada.

In addition to the youth counsellors, teenagers are being serviced by some of our regular staff. For the same period of 4 months, another 98 clients had been seen and of that number, 82 cases were receiving services actively. One case had been referred to detox and none to the rehabilitation programs.

A grand total of 230 youngsters have therefore been serviced by the Commission during that four month period and 165 were active cases as of January 30th. (Table 1). An average of 6% of teenagers were referred to residential programs. To date, the teenagers have been referred mainly by the Justice System, the School Counsellors and parents. There seems to be an increasing tendency by judges to refer young offenders for treatment - as chemical addiction is often linked to delinquency.

Although it is suggested that the problem is severe amongst the clientele of Access Centres, it is not reflected in the referrals to date - as only 7 youngsters have been referred by that organization.

Issues of Concern

The four youth counsellors have thus far identified the following issues of concern in treating adolescents:

- Housing (many homeless)
- Social assistance lacking for 16-19 year old
- Gap in services for 16-19 year old (financial assistance, mental health services etc.)
- The level of emotional problems and distress is very high
- There seems to be a need for residential treatment to address behaviourial difficulties related to but not the main cause of addiction problems
- No option to work
- Satanism is surfacing in many cases
- Lack of referrals from Access Centres
- Lack of ADDC human resources to service youngster
- Relief care and support services for families is lacking

The counsellors also made the point that flexibility is needed when dealing with kids and the intervention is generally more time consuming and more intense. Youngsters seeking help or being referred are either those with no more resources (i.e. human or otherwise) and at the "end of the road", or else they have lots of support from their families and peers.

It is the opinion of ADDC youth counsellors that there is not one solution to the problems of youngsters suffering from chemical addiction, but there is a need for a variety of answers.

There is no doubt that some people in the community will continue to entertain the idea that residential treatment is the only valid way to go for all addicted youngsters. Research demonstrates, however, that in-patient treatment no matter the duration is no more effective than out-patient treatment. (Annis 1985/86). That being said the counsellors recognize the need for some type of residential services and/or rehabilitation program for some teenagers.

Recommendations:

- In view of a rapid increase of the demand for services and an expected demand for outreach services, additional counsellors will be required if the ADDC is to serve the population throughout the province.

- There needs to be different options available for the treatment of teenagers.

- There should be day care programs established throughout the province.

- Back up residential facilities have to be made available - specifically for teenagers. This could be partially answered within ADDC existing treatment centres.

- A pilot project could be initiated for a type of in-patient rehabilitation program designed specifically for adolescents in Saint John and Campbellton.

Summary

The problems faced by youth are multi-dimensional and extend far beyond chemical dependency. Youth, especially between 16 and 19 are lacking services. There is no shelter for the homeless, it is very difficult for teens to get financial assistance and job opportunities are scarce. Professional help for behaviourial and mental health difficulties is not seemingly available.

In terms of treatment for chemical addiction, out-patient services with back-up residential services along with daycare and rehabilitation programs are suggested.

The mechanisms to evaluate the efficiency of programs for adolescents need to be further developed and close monitoring has to continue.

There is a consensus that family involvement is an essential key to treatment of youngsters in this province.

As the community becomes more aware of the existence of services, the demand is increasing at a fast rate and it is expected that the four human resources allocated to ADDC will be largely insufficient in the very near future. The type of services needed by the adolescent, other than out-patient counselling have to be developed. These should include day care, back-up residential and rehabilitation programs.

The Commission is pursuing its contacts with other Canadian agencies to answer the needs of the teenagers of New Brunswick.

TABLE 1

Adolescent treatment services

Treatment services offered to youth by the Alcoholism and Drug Dependency Commission between October 1st 1990 and Febuary 6th 1991

Youth Counsellor	Cases Seen	Closed Cases	Active Cases	Ref. Detox	Ref. Rehab	Out of Canada
Moncton	54	36	18	7	4	0
Saint John	18	0	18	1	1	1
Fredericton	36	9	27	2	2	0
Tracadie	24	4	20	0	0	0
Sub Total	**132**	49	83	10	7	1
Other Counsellors	Cases Seen	Closed Cases	Active Cases	Ref. Detox	Ref. Rehab	Out of Canada
Fredericton	12	8	4	1	0	0
Moncton	10	3	7	0	0	0
Saint John	30	3	27	1	1	0
Edmundston	38	2	36	0	0	0
Bathurst	8	0	8	0	0	0
Sub/Total	**98**	16	82	2	1	0
Total	**230**	65	165	12	8	1

TABLE 2

Breakdown by Province

1989/90

Province	% of Total clients 19 & under	% Referred to Detox	% Referred to Rehab
Newfoundland/Lab	34.0	2.0	0.0
Nova Scotia	4.7	-	10.0
Ontario	5.0	5.0	20.0
Alberta	10.0	9.0	19.0
Manitoba	11.7	4.2	13.0
Saskatchewan	18.1	10.3	18.9
British Columbia	10.5	10.0	6.0
Average	13.4	6.7	12.4

Appendix B

Community Services Initiatives for Youth

ALCOHOLISM AND DRUG DEPENDENCY COMMISSION OF NEW BRUNSWICK

COMMUNITY SERVICES INITIATIVES AIMED AT YOUTH (Ages 15-24)

Safe Grad/Finissants sans accident

Two conferences (french and english) held annually to assist high school graduates in developing chemical free graduation activities. Support services are offered to school planning committees on a regional basis.

Teens Against Driving Drunk -TADD

A high school based initiative that supports the development of student oriented committees who develop awareness around the issues of drinking and driving. Programming has begun to develop at the junior high school level. School committees are supported by regional staff.

Information Sessions within the School Based Curriculum

Staff are available to provide information session to students at all grade levels (elementary,junior/senior high, post secondary and community college systems) delivered through a variety of subject areas or related activities within the school setting.

University Orientation Weeks

The Commission has been assisting universities in developing orientation activities that are chemical free. Resources both financial and human have been made available.

(DEPENDING ON AVAILABILITY OF STAFF)

Peer Education/Counselling Programs

We assist schools in developing peer education programs through the use of our staff as well as the staff within the school itself. Often we are involved in a school based initiative which will focus on more than just drug and alcohol use.

We have also assisted in the training of trainers in the peer education/counselling model.

Student Assistance Programs

In the Bathurst region, Commission staff have initiated the development of the program in a school. In the Fredericton region, Commission staff consulted on the development of the program. The intent of the program is to develop a system of referral and help within the school to assist students having difficulties with drugs and alcohol.

C.A.D.A.C.

A youth group orientation for francophone youth between the ages of 10-16. The group have established activities around their pledge of abstinence from alcohol and drugs. Commission staff have assisted in developing the program approach adopted by this group.

Support Groups for Children of Alcoholics

Primarily under development in the Fredericton region, this project has developed support groups in junior and senior high schools for children of alcoholic parents. Staff provide the professional services to the group. Approach is being initiated in the Moncton region.

Support Groups for High Risk Students with Chemical Dependency Problems

This project is targeted at the high risk in-school student who needs information and an opportunity to talk openly about their situations. Many vary from region to region in name of program and approach.

Working with High Risk Youth

Staff are answering requests from youth initiative programs to provide information/workshop sessions for this target group of youth. As well, training is provided around youth and chemical dependency for other helping professionals involved with high risk youth.

Youth Diversion Programming

Some regions have developed programs through the Department of Justice to work with youth who have become involved with the law due to or as a result their drug use.

Videotox

A regional high school contest designed to encourage youth to develop drug awareness ideas through a variety of media sources. Available through francophone high schools.

Support Groups for Youth in Recovery

This is currently offered through Ridgewood Treatment Centre as part of their youth treatment services. There are similar activities available through the Moncton Treatment Centre.

PROGRAMS TARGETED AT ADOLESCENTS AND THEIR SIGNIFICANT OTHERS

In-school Curriculum

ADDCNB has been a consultant to the Department of Education over the years with regards to the unit in the health curriculum dealing with chemical dependency causing substances. This program is available to students in grades 1-9 with the grade 7-9 levels receiving a new health program in the Fall of 91. Along with curriculum input, we provide supplementary materials (pamphlets, films/videos, resource speakers) on request of the classroom teacher.

In-service Teacher Training

We provide a wide range of services to teachers and guidance counsellors with regards to drug and alcohol issues. We are often presenters at professional development days or are called upon by individual schools to work with their staff.

Ready or Not Program

This program designed by the federal government has been targeted at parents of children between the ages of 8 and 12. As a prevention program, its aim is to provide "information poor parents" with some basic skill in communications, effective listening, discipline and talking about drugs and alcohol with their children. This course is designed for parents who would not normally attend parenting programs, who live in rural areas not service by helping agencies or parents from low income situations. This is a community ownership program that is facilitated by the Commission.

Parenting Programs

The Commission can provide parents with a variety of parenting course experiences. All regions are prepared to provide this service. Targeted primarily to parents of pre and adolescent ages.

Community Mobilization Activities Around Adolescents/Youth

ADDCNB has been actively participating in community mobilization activities around adolescents/youth. In programs of this nature we assist communities in identifying their needs and developing approaches to address those needs. Ultimately the responsibility for carrying out these programs rests with the community as ownership fosters success.